

The Sale of Alcoholic Beverages to Minors

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Synopsis

This study reports the findings of a field trial designed to assess the extent of alcohol sales to minors in one county in northwest New Jersey.

Two 19-year-old males were successful in purchasing alcoholic beverages in 27 of 46 (58.7 percent) establishments visited. On the following day, 23 of the establishments that sold the alcohol were visited again and, on this occasion, 18 (78.3 percent) sold alcohol to the minor.

This study supports the findings from surveys that show that underage drinkers can obtain alcohol with ease. Many community groups are now taking action to rectify this situation, and data of the type reported in this paper can be used to assess the effectiveness of their actions.

Surveys of high school students show that by their senior year close to 90 percent have tried alcohol at least once, with 30 percent reporting drinking five or more drinks in a row in the past 2 weeks (1). More than 80 percent of 10th grade students report that alcohol is "fairly easy" or "very easy" to obtain (1). A recent survey of 7th through 12th graders found that about two-thirds of those who had drunk alcohol in the past year reported buying it directly from stores (2). Early initiation into alcohol use is problematic because it is both hazardous in the short-term (2) and associated with later progression to use of illicit drugs (3).

For a number of years, field trials of sales have been used to document the availability of tobacco products to minors and to evaluate the impact of preventive measures. Altman and colleagues provide details on these trials (4). To date, however, the research literature documenting attempts to use this strategy to assess the extent of illegal sales of alcohol to young people has been extremely limited. Preusser and Williams (5) found that underage males were successful in purchasing beer from stores in 97 percent of attempts made in Washington, DC, 82 percent of attempts made in Westchester County, NY, and 44 percent of attempts made in Albany and

Schenectady Counties, NY. In each of the three locations about 100 stores were visited. Perry and coworkers (6) reported that of 336 attempts made by young women (older than age 21 but judged by a panel to be about 18) to purchase alcohol in six northern counties of Minnesota, 47 percent were successful. Our study reports data concerning the sale of alcohol to minors collected by the Prosecutor's Office in one county in northwest New Jersey.

Methods

During a 1-week period in April 1993, 46 liquor stores and package good stores were visited by one of two 19-year-old males who attempted to purchase a six-pack of beer. These young men were volunteer students working as interns in the County Prosecutor's Office. They did not appear old for their age, did not use false identification, and did not attempt to deceive the salesperson in any other way, such as growing facial hair or altering their appearance to look older.

If salespeople requested identification, the young men stated that they were not carrying any and left the premises. Each person was wearing a recording device so that his exchange with the salesperson was

recorded. If a purchase was made, the young man gave the alcoholic beverage to an investigator from the County Prosecutor's Office who was driving the young man's car. Both minors were given breathalyzer tests at the beginning and end of each day of the operation. All the tests were negative.

The 46 outlets visited (representing approximately 20–30 percent of all licensed establishments) were selected from 16 of the 24 municipalities in the county. Within each municipality, the selection of establishments was random. The range of outlets selected in each of the 16 municipalities ranged from one to six (with a mode of two). The establishments received no prior warning of the operation. Attempts to purchase were made during both the afternoon and the evening.

Results and Discussion

The minors were successful in purchasing alcohol in 27 (58.7 percent) of the 46 establishments visited. The group of 27 consisted of 6 liquor stores, 3 convenience stores, 2 franchise operations, and 16 bars. Twenty-three of the stores where a purchase was made were visited again the next day. This time, 18 (78.3 percent) of the attempts were successful.

Although limited to just one county in one State, and to a relatively small sample of retail establishments, the findings from this study concerning the sale of alcohol to minors are striking. They confirm accounts obtained from surveys that show that adolescents who wish to purchase alcohol can do so with relative ease.

To our knowledge, this is only one of three research reports presenting a detailed account of the extent of sales of alcohol to those younger than the legal drinking age based on actual purchases from retail outlets. Our finding that almost 6 of 10 establishments were willing to sell alcohol to a minor gives clear cause for concern. Even more disturbing is the fact that another successful purchase was made at 78 percent of these locations the very next day. This suggests that certain stores may provide easier access to alcohol than others—something that is likely to be common knowledge among local underage drinkers (7).

New Jersey law prohibits persons younger than age 21 years from purchasing and possessing alcoholic beverages, with violators subject to a fine of between \$100 and \$1,000 and a maximum jail term of 6 months.

The 19-year-olds making the purchases in our study had to be granted immunity under State statutes and closely supervised by the County Prosecutor's

Office. This supervision included the purchasers wearing a recording device to monitor the actual purchase attempt. Under New Jersey law, the use of such devices requires the consent of one of the parties to the conversation (in this case, the purchaser) and the approval of the County Prosecutor. As to granting immunity from prosecution, prosecuting attorneys in New Jersey, as in other States, have the authority when it is considered to be in the interest of justice. (The practice is most commonly employed when the State is prosecuting codefendants). In fact, employment of this procedure to limit the sale of alcoholic beverages to adolescents would appear to be fairly widespread in the United States, with a recent survey showing that officials from 24 of 51 alcohol enforcement agencies (50 States plus the District of Columbia) reported the use of undercover operations that involved purchase attempts by minors (2).

Various precautions were taken during the course of our undercover operation to ensure that at no point did the underage person who entered the establishment consume any alcohol. We tape-recorded the exchange between the salesperson and the minor, and gave the minor a breathalyzer test. In addition, precautions were taken so as to avoid charges of entrapment on the part of the salesperson, such as choosing underage operatives who did not appear old for their age.

In regard to that point, it is worth noting that at their initial court appearance, slightly more than half of the 46 people who had sold alcohol to the minors did indeed plead not guilty, claiming that they were entrapped because the underage operatives would have appeared older than age 21 to any reasonable person. At the subsequent court appearance, all the defendants pleaded guilty when confronted with the purchasers. Thus, once the minors were present, none of the defendants was willing to claim in court that they appeared older than age 21 years. In addition, it did not prove necessary to use the recording of the purchase attempt in any of the prosecutions.

To date, the vast majority of public health efforts to counter underage drinking have focussed on reducing demand, principally through education programs. It is now recognized that such an approach can have only limited impact on the problem of underage drinking and that it is essential to develop additional strategies that limit the accessibility of young people to alcohol (such as raising the minimum drinking age) (8).

A variety of means can be used to reduce accessibility, one of which is the enforcement of regulations governing establishments that sell alcohol (9). In

many parts of the country, local groups are engaged in taking action designed to limit the sale of alcohol in their communities (10), and research in the alcohol field is most likely to influence policy when coupled with such grass roots initiatives (11). The strategy described in this study can potentially be used to monitor and support these community efforts to limit the availability of alcohol to young people (12).

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Public Health Applications of Hansen's Disease Research and Treatment

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Synopsis

Because of the similarities in causative agents of Hansen's disease and tuberculosis, Hansen's disease research is now being used in the identification, treatment, and prevention of tuberculosis. Numerous

studies are under way to screen and develop new drugs to combat the threat of multiple drug-resistant tuberculosis. Additional studies focus on factors to reduce the transmission of tuberculosis and on the development of techniques for early diagnosis and identification of drug resistance.

Advances in Hansen's disease research and treatment also are being applied to the prevention of ulcers and amputations in diabetics and others without protective sensation in their feet.

The Lower Extremity Amputation Prevention Program, developed at the Gillis W. Long Hansen's Disease Center in Carville, LA, is a multi-disciplinary approach that includes screening, risk assessment, and the development of a treatment plan with an emphasis on patient involvement. Expected to prevent up to 90 percent of diabetes-related amputations, the program is being implemented in Jackson, MS, in a community-based diabetic foot program and will be replicated throughout the United States.